Fill in this information to identify your case:		Entered 08/17/18 15:28:07 Rage 1 of 64	Desc Main
United States Bankruptcy Court for the:	Document	Page 1 01 04	
Northern District of Illinois			
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13		☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to	Dante First name J Middle name Serrano	First name Middle name
	your meeting with the trustee.	Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
2.	All other names you have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx- <u>4</u> <u>2</u> <u>1</u> <u>4</u> OR 9xx-xx	xxx - xx

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Page 2 of 64 Middle Name **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): Any business names and Employer Identification ✓ I have not used any business names or EINs. ■ I have not used any business names or EINs. Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and doing business as names Business name Business name EIN EIN EIN If Debtor 2 lives at a different address: Where you live 3301 Newcastle Rd Number Street Number Street Waukegan, IL 60087 City State ZIP Code ZIP Code City State Lake County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from the one it in here. Note that the court will send any notices to you at above, fill it in here. Note that the court will send any notices this mailing address. to you at this mailing address. Number Street Number Street P.O. Box P.O. Box City ZIP Code ZIP Code State City State Why you are choosing this Check one: Check one: district to file for bankruptcy ☑ Over the last 180 days before filing this petition, I have Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. lived in this district longer than in any other district. ☐ I have another reason. Explain. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408) (See 28 U.S.C. § 1408)

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Par	rt 2: Tell the Court About Yo	Bankruptcy Case	
7.	The chapter of the Bankruptcy Code you are choosing to file under	eck one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankrup orm B2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11 Chapter 12 Chapter 13	tcy
8.	How you will pay the fee	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the <i>Application for Individuals to Pay Your Filing Fee in Installments</i> (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form 103B) and file it with your petition.	
9.	Have you filed for bankruptcy within the last 8 years?	Mo. Yes. District When Case number District When Case number MM / DD / YYYYY District When Case number MM / DD / YYYYY MM / DD / YYYYY	
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	No. Yes. Debtor Relationship to you District When Case number, if known Debtor Relationship to you District When Case number, if known MM / DD / YYYY	- - -
11.	Do you rent your residence?	No. Go to line 12. Yes. Has your landlord obtained an eviction judgment against you? No. Go to line 12. Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it as part of this bankruptcy petition.	

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Par	t 3: Report About Any Busin	esse	es You Own as a Sole P	roprietor			
			No. Go to Part 4.				
12.	Are you a sole proprietor of any full- or part-time business?		Yes. Name and location of bus	iness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.		Number Street				
	Sheet and attach it to this petition.		City			ZIP Code	
				dosoribo vou		Zii Gode	
			Check the appropriate box to a Health Care Business (as	-			
			☐ Single Asset Real Estate))	
			☐ Stockbroker (as defined in	`	- ` '	,,	
			Commodity Broker (as def	ined in 11 U.	S.C. § 101(6))		
			☐ None of the above				
	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business debtor?</i> For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D).	oper 11 U	Allines. If you indicate that you a ations, cash-flow statement, ar .S.C. § 1116(1)(B). No. I am not filing under Chap Bankruptcy Code. Yes. I am filing under Chap Code.	re a small but nd federal inco Chapter 11. pter 11, but I pter 11 and I	siness debtor, you mus ome tax return or if any am NOT a small busin am a small business de	e a small business debtor so the tattach your most recent balant of these documents do not exit ess debtor according to the debtor according to the definition	ce sheet, statement of st, follow the procedure in finition in the
Par	t 4: Report if You Own or Ha		Any Hazardous Property	y or Any P	roperty That Nee	ds Immediate Attentior	1
14.	Do you own or have any		No.				
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or	_	Yes. What is the hazard?				
	safety? Or do you own any property that needs immediate attention?		If immediate attention is	needed, why	/ is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Number	Street		
				City		State	ZIP Code

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Middle Name

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Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

and I received a certificate of completion.

You must check one: ✓ I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition,

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credi
counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the

> internet, even after I reasonably tried to do so

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver

of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

■ I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

l certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counceling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Part	6: Answer These Question	ns for	Reporting Purposes				
16.	What kind of debts do you have?	16b.	an individual primarily for a No. Go to line 16b. Yes. Go to line 17. Are your debts primarily be business or investment or the No. Go to line 16c. Yes. Go to line 17.	personal usiness on the control of t	r debts? Consumer debts are define, family, or household purpose." debts? Business debts are debts the operation of the business or investage are not consumer debts or business	nat you in stment.	
17.	Are you filing under Chapter 7?		No. I am not filing under 0	Chapter 7	7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Ø	Yes. I am filing under Chap	oter 7. Do	o you estimate that after any exempt will be available to distribute to unse		
		√	1-49 🔲 50-99		1,000-5,000		25,001-50,000
	How many creditors do you estimate that you owe?		100-199 200-999		10,001-25,000	_	More than 100,000
			\$0-\$50,000		\$1,000,001-\$10 million		\$500,000,001-\$1 billion
	How much do you estimate	$\mathbf{\Lambda}$	\$50,001-\$100,000		\$10,000,001-\$50 million		\$1,000,000,001-\$10 billion
	your assets to be worth?		\$100,001-\$500,000		\$50,000,001-\$100 million		\$10,000,000,001-\$50 billion
			\$500,001-\$1 million		\$100,000,001-\$500 million		More than \$50 billion
			\$0-\$50,000		\$1,000,001-\$10 million		\$500,000,001-\$1 billion
	How much do you estimate		\$50,001-\$100,000		\$10,000,001-\$50 million		\$1,000,000,001-\$10 billion
	your liabilities to be?	$ \sqrt{} $	\$100,001-\$500,000		\$50,000,001-\$100 million		\$10,000,000,001-\$50 billion
			\$500,001-\$1 million		\$100,000,001-\$500 million		More than \$50 billion
Part	: 7: Sign Below						
For	If I have Code. I If no attropher obtained I request can rest	chose unders orney red and rest relief stand mult in fin	n to file under Chapter 7, I an tand the relief available unde epresents me and I did not pare ad the notice required by 11 in accordance with the chapmaking a false statement, concepts.	n aware the reach charge agreement of title cealing p	napter, and I choose to proceed und e to pay someone who is not an atto 342(b). e 11, United States Code, specified	Chapter ler Chapt orney to h in this pe erty by fra	7, 11,12, or 13 of title 11, United States er 7. nelp me fill out this document, I have etition. aud in connection with a bankruptcy case

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Tina Adams	Date 08/17/2018	
Tina Adams, Attorney	MM / DD / YYYY	
Tina Adams		
Printed name		
Robert J. Adams & Associates		
Firm name		
540 W. 35th Street		
Number Street		
Number Street	IL 60616	
Number Street Chicago		
Number Street Chicago		
Number Street Chicago City	State ZIP Code	
Number Street Chicago		
Number Street Chicago City	State ZIP Code	
Number Street Chicago City	State ZIP Code	

Fill in this info	ormation to identify your case ar	ad this filing:	="	17/18 15:28:07	Desc Main
FIII III UIIS II II	ornation to identity your case at	ia iriis iiiirig.		-1	
Debtor 1	Dante	J	Serrano		
Dobtor 1	First Name	Middle Na			
D 14 0					
Debtor 2 (Spouse, if f	filing) First Name	Middle Na	ame Last Name		
(Opouse, ii i	ming) Filst Name	Wildule IN	anie Last Name		
United State	es Bankruptcy Court for the:		Northern District of Illinois		
Case numb	er		_		Check if this is an amended filing
	Form 106A/B ule A/B: Propei	-tv		-	12/15
<u> </u>	410,42111000				12/13
1. Do you o	own or have any legal or equita Go to Part 2.	<u> </u>	, Land, or Other Real Estate You Own o		n
✓ Yes.	Where is the property?				
	01 Newcastle Rd		What is the property? Check all that apply.	Do not deduct sec	ured claims or exemptions. Put the
	eet address, if available, or other scription		✓ Single-family home ☐ Duplex or multi-unit building		ured claims on <i>Schedule D:</i> ve Claims Secured by Property.
	aukegan, IL 60087		Condominium or cooperative Manufactured or mobile home Land	Current value of the entire property? \$99,48	he Current value of the portion you own?
City	y State	ZIP Code	Investment property	Describe the natur	e of your ownership interest (such
			☐ Timeshare		ncy by the entireties, or a life
	ike unty		Other	estate), if known.	,,
000	unty		Who has an interest in the property? Check one		
			Debtor 1 only	Homestead	
			Debtor 2 only		
			Debtor 1 and Debtor 2 only		community property
			At least one of the debtors and another	(see instructions	S)

Source of Value:

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages

you have attached for Part 1. Write that number here.....

CMA on the Internet (Redfin and Zillow)

\$49,743.00

Filed 08/17/18 Entered 08/17/18 15:28:07

Document Page 9 of 64 Case 18-23316 Doc 1 Debtor 1 Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No **√** Yes 3.1 Make: Chevrolet Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put the Debtor 1 only amount of any secured claims on Schedule D: **Traverse** Model:

Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

Debtor 2 only

instructions)

Debtor 1 and Debtor 2 only

At least one of the debtors and another

☐ Check if this is community property (see

√ No ☐ Yes

Year:

Approximate mileage:

Other information:

Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....

\$12,000.00

Current value of the

\$12,000.00

portion you own?

Creditors Who Have Claims Secured by Property.

Current value of the

\$12,000.00

entire property?

Describe Your Personal and Household Items Part 3:

Do you own or have any legal or equitable interest in any of the following items?

2016

Current value of the portion you own?

Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

No

✓ Yes. Describe.......

See Attached.

\$700.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No Yes. Describe......

Appliances, 2 TV's, One Lap, Cell Phone

\$800.00

8. Collectibles of value

Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; Examples: stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

√ No

Yes. Describe......

Debtor 1 Case 18-23316 Doc 1 Filed 08/17/18 Entered 08/17/18 15:28:07 Desc Main

Page 10 of 64 Middle Name 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments **✓** No Yes. Describe...... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment **✓** No ☐ Yes. Describe...... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No **Necessary Clothes** Yes. Describe...... \$200.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver **√** No Yes. Describe...... 13. Non-farm animals Examples: Dogs, cats, birds, horses **✓** No Yes. Describe...... 14. Any other personal and household items you did not already list, including any health aids you did not list **√** No ☐ Yes. Describe...... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,700.00 for Part 3. Write that number here.....→ Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No \$0.00

Cash.....

Case 18-23316 Doc 1 Debtor 1

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Dogument F First Name Middle Name

17.	•		ertificates of deposit; shares in credit unions, brokerage houses, and other	
	Examples.	similar institutions. If you have multiple accounts		
	☐ No ☑ Yes			
			locit tion name.	
			Institution name:	
		17.1. Checking account:	Fifth Third Bank	\$200.00
		17.2. Checking account:		
		17.3. Savings account:		
		17.4. Savings account:		
		17.5. Certificates of deposit:		
		17.6. Other financial account:		
		17.7. Other financial account:		
		17.8. Other financial account:		
		17.9. Other financial account:		
18.	Bonds, mu	utual funds, or publicly traded stocks		
		Bond funds, investment accounts with brokerage f	irms, money market accounts	
	✓ No ☐ Yes			
19.		cly traded stock and interests in incorporated an artnership, and joint venture	d unincorporated businesses, including an interest in	
		ve specific tion about		
20.	Governme	ent and corporate bonds and other negotiable a	nd non-negotiable instruments	
	Non-negotia	instruments include personal checks, cashiers' chec lable instruments are those you cannot transfer to so		
		ve specific tion about		
21.	Retirement	t or pension accounts		
	√ No	st each account	thrift savings accounts, or other pension or profit-sharing plans	

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22.	Security deposits and prepayments
	Your share of all unused deposits you have made so that you may continue service or use from a company
	Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others
	☑ No □ Yes
23.	Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)
	☑ No ☐ Yes
24.	Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.
	26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).
	☑ No □ Yes
25.	Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit
	✓ No ☐ Yes. Give specific information about them
26.	Patents, copyrights, trademarks, trade secrets, and other intellectual property
	Examples: Internet domain names, websites, proceeds from royalties and licensing agreements
	✓ No ☐ Yes. Give specific information about them
27.	Licenses, franchises, and other general intangibles
	Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses
	✓ No Yes. Give specific information about them
28.	Tax refunds owed to you
	☑ No
	Yes. Give specific information about them, including whether you already filed the returns and the
	tax years
29.	Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement
	✓ No ☐ Yes. Give specific information
30.	Other amounts someone owes you
	Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else
	✓ No ☐ Yes. Give specific information

Debtor 1 Case 18-23316 Doc 1 Filege 08/17/18 Entered 08/17/18 15:28:07 Desc Mail

Page 13 of 64 Middle Name 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance **√** No ☐ Yes. Name the insurance company of each policy and list its value.... 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. **✓** No ☐ Yes. Give specific information....... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim..... Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims **√** No ☐ Yes. Describe each claim..... 35. Any financial assets you did not already list **√** No ☐ Yes. Give specific information........ 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$200.00 for Part 4. Write that number here..... Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? ✓ No. Go to Part 6. Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6: If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? ✓No. Go to Part 7. Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership **√** No ☐ Yes. Give specific information..... 54. Add the dollar value of all of your entries from Part 7. Write that number here...... \$0.00 Debtor 1 Case 18-23316 Doc 1 Filed 08/17/18 Entered 08/17/18 15:28:07 Desc Main

Total of all property on Schedule A/B. Add line 55 + line 62.....

Page 14 of 64 Middle Name Part 8: List the Totals of Each Part of this Form Part 1: Total real estate, line 2..... \$49,743.00 56. Part 2: Total vehicles, line 5 \$12,000.00 Part 3: Total personal and household items, line 15 \$1,700.00 57. Part 4: Total financial assets, line 36 58. \$200.00 Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61..... \$13,900.00 Copy personal property total -> \$13,900.00 62.

\$63,643.00

Official Form 106A/B Schedule A/B: Property page 7

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Case number (if known)

First Name

Debtor 1

Middle Name

Last Name

SCHEDULE A/B: PROPERTY

Continuation Page

О.	Household goods and furnishings Bed and couches	\$200.00
	4 Rooms of furnishings, linens, dinning and cooking ware	\$500.00

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			2000	11111: 127 (7) (7)
Fill in this information t	o identify your case:			
Debtor 1	Dante	J	Serrano	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	<u>.</u>
United States Bankru	ptcy Court for the:	N	orthern District of Illi	nois
Case number (if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim a	as Exempt		
 Which set of exemptions are you claiming? Ch ✓ You are claiming state and federal nonbankrup ✓ You are claiming federal exemptions. 11 U.S. For any property you list on Schedule A/B that 	otcy exemptions. 11 U.S.C. § C. § 522(b)(2)	522(b)(3)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description: 3301 Newcastle Rd Waukegan, IL 60087 Line from Schedule A/B:1.1	\$49,743.00	\$0.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-901
Brief description: 2016 Chevrolet Traverse Line from Schedule A/B: 3.1	\$12,000.00	\$2,400.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)
3. Are you claiming a homestead exemption of m (Subject to adjustment on 4/01/19 and every 3 yes ✓ No ☐ Yes. Did you acquire the property covered by t ☐ No ☐ Yes	ars after that for cases filed on	•	

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Document

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Debtor 1 Dante Serrano Case number (if known) First Name Middle Name Last Name

Part 2: Additional Page			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description: Bed and couches Line from Schedule A/B: 6	\$200.00	\$0.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-902
Brief description: 4 Rooms of furnishings, linens, dinning and cooking ware Line from Schedule A/B: 6	\$500.00	\$500.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-902
Brief description: Appliances, 2 TV's, One Lap, Cell Phone Line from Schedule A/B: 7	\$800.00	\$800.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Necessary Clothes Line from Schedule A/B:11	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a), (e)
Brief description: Cash Line from Schedule A/B: 16	\$0.00	\$0.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

Filli	n this information to	identify your case:			17/1	8 15:28:07	Desc Main	
De	btor 1	Dante	J	Serrano				
	btor 2	First Name	Middle Name Middle Name	Last Name Last Name				
				Northern District of Illinois				
Ca	ited States Bankrupt se number (nown)	cy Court for the.	'	Northern district of illinois		Į	Check if this is a amended filing	ın
Off	icial Form	106D						
Sc	hedule D	: Creditors	s Who H	lave Claims S	secured by	/ Property		12/15
_ <u>v</u>	any creditors have No. Check this box Yes. Fill in all of the			our other schedules. You have	e nothing else to repor	rt on this form.		
	claim. If more than o		ticular claim, list t	cured claim, list the creditor se the other creditors in Part 2. A r's name.	•	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	GM Financial		Describe	e the property that secures the	ne claim:	\$12,159.00	\$0.00	\$12,159.00
	Creditor's Name 401 Emnarcadero Number Stree		As of the	e date you file, the claim is: C	Check all that apply			
	Arlington, TX 76014 City	State ZIP C		•	moor all triat apply.			
	Who owes the deb ✓ Debtor 1 only	t? Check one.	Unlqu	uidated				
	Debtor 2 only		Dispu	ıted				
	Debtor 1 and De	btor 2 only		of lien. Check all that apply.				
	_	e debtors and another		greement you made (such as r red car loan)	nortgage or			
	Check if this cla		_	tory lien (such as tax lien, med	chanic's lien)			
	community deb	t	Judgr	ment lien from a lawsuit				

Other (including a right to offset)

Add the dollar value of your entries in Column A on this page. Write that number here:

Last 4 digits of account number 7 1 5 2

Date debt was incurred

04/06/2016

\$12,159.00

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First Name Middle Name Document Page 19 of 64

Pá	Additional Page After listing any entries on with 2.3, followed by 2.4, a	this page, number them beginning nd so forth.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.2	Wells Fargo Acceptance	Describe the property that secures the claim:	\$5,000.00	\$200.00	\$4,800.00
	Creditor's Name	Bed and couches			
	Attn: Bankruptcy Dept.				
	PO Box 13460 Number Street	As of the date you file, the claim is: Check all that apply.			
	Philadelphia, PA 19101	Contigent			
	City State ZIP Code	Unlquidated			
	Who owes the debt? Check one.	Disputed			
	Debtor 1 only	Nature of lien. Check all that apply.			
	Debtor 2 only	✓ An agreement you made (such as mortgage or			
	Debtor 1 and Debtor 2 only	secured car loan)			
	At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien)			
	Check if this claim relates to a				
	community debt	Other (including a right to offset)			
	Date debt was incurred	Last 4 digits of account number			
2.3	Wells Fargo Home Mortgage Creditor's Name Correspondence X2501-01T	Describe the property that secures the claim: 3301 Newcastle Rd Waukegan, IL 60087	\$89,091.00	\$49,743.00	\$0.00
	1 Home Campus Number Street	As of the date you file, the claim is: Check all that apply.			
	Des Moines, IA 50328	Contigent			
	City State ZIP Code	Unlquidated			
	Who owes the debt? Check one.	Disputed			
	Debtor 1 only	Nature of lien. Check all that apply.			
	Debtor 2 only	☑An agreement you made (such as mortgage or			
	Debtor 1 and Debtor 2 only	secured car loan)			
	At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien)			
	Check if this claim relates to a	☐ Judgment lien from a lawsuit			
	community debt	Other (including a right to offset)			
	Date debt was incurred 01/12/2016				
	01/12/2010	Last 4 digits of account number			
	Add the dollar value of your entries in Colum	nn A on this page. Write that number here:	\$94,091.00		
	If this is the last page of your form, add the o	dollar value totals from all pages. Write that number	\$106,250.00		

Fill in this information						
Fill in this information to	o identify your case:			17/18 15:28:07	Desc Main	
Debtor 1	Dante First Name	J Middle Name	Serrano Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankru			Northern District of Illinois			
Case number (if known)					Check if this is an amended filing	n
Official Form	106E/F					
Schedule E	E/F: Credi	tors Who	Have Unsecured C	Claims		12/15
Part 1: List All o 1. Do any creditors V No. Go to Par Ves.	f Your PRIORIT	Y Unsecured CI		umber (if known).		
identify what type possible, list the cl	of claim it is. If a clair aims in alphabetical	m has both priority ar order according to tl	s more than one priority unsecured claim, nd nonpriority amounts, list that claim here ne creditor's name. If you have more than st the other creditors in Part 3.	and show both priority and n	onpriority amounts. As m	uch as
identify what type possible, list the cl Part 1. If more tha	of claim it is. If a clair aims in alphabetical In one creditor holds	m has both priority ar order according to the a particular claim, li	nd nonpriority amounts, list that claim here ne creditor's name. If you have more than	and show both priority and n two priority unsecured claim Total	onpriority amounts. As m s, fill out the Continuation Priority Non	priority
identify what type possible, list the cl Part 1. If more that (For an explanation) Priority Creditor's	of claim it is. If a clair aims in alphabetical in one creditor holds in of each type of cla	m has both priority ar order according to the a particular claim, li	nd nonpriority amounts, list that claim here ne creditor's name. If you have more than st the other creditors in Part 3.	and show both priority and n two priority unsecured claim Total claim	onpriority amounts. As m s, fill out the Continuation	priority

Is the claim subject to offset?

☐ No☐ Yes

Other. Specify

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DCDI	First Name	Middle Name	Dogyment	Page 21 of 64	Case number (if known)	
Par	t 2: List All of Your NO	NPRIORITY LInsec	ured Claims			
гаі	t Z. LIST AII OF TOUR NOT	NERTORITI OTISEC	urea Cialilis			
3.	Do any creditors have nonprio	-				
	☑ No. You have nothing to re☑ Yes.	port in this part. Submit	this form to the court with	your other schedules.		
						,
	List all of your nonpriority unsussecured claim, list the creditor than one creditor holds a partic Part 2.	or separately for each cl	aim. For each claim liste	d, identify what type of claim i	it is. Do not list claims already i	ncluded in Part 1. If more
						Total claim
4.1	Capital One		Last A	digits of account number _		\$4,000.00
	Nonpriority Creditor's Name					
	15000 Capital One			was the debt incurred? he date you file, the claim is:		
	Number Street			ontingent	. Oncor all that apply.	
	Richmond, VA 23238 City	State ZIP Code	_	nliquidated		
	Who incurred the debt? Ch	neck one	☐ Di:	sputed		
	Debtor 1 only	icok of ic.	Туре о	f NONPRIORITY unsecured	l claim:	
	Debtor 2 only			udent loans		
	Debtor 1 and Debtor 2 or	nly	☐ Öt	oligations arising out of a sepa	aration agreement or	
	At least one of the debtor	s and another	_	rorce that you did not report a ebts to pension or profit-sharir		
	Check if this claim is fo	r a community debt		nilar debts	ng plans, and other	
	Is the claim subject to offse	et?	☑ Ot	her. Specify		
	☑ No					
	Yes					
4.2	Capital One Bank (USA) N	IA	Last 4	digits of account number _		\$5,000.00
	Nonpriority Creditor's Name	_		was the debt incurred? _		
	Attn: General Correspond	lence		he date you file, the claim is:	: Check all that apply.	
	PO Box 30285			ontingent		
	Number Street		Ur	nliquidated		
	Salt Lake City, UT 84130		Di:	sputed		
	City	State ZIP Code	Туре о	f NONPRIORITY unsecured	l claim:	
	Who incurred the debt? Ch	neck one.		udent loans		
	Debtor 1 only			oligations arising out of a separate		
	Debtor 2 only			rorce that you did not report a ebts to pension or profit-sharir		
	Debtor 1 and Debtor 2 or At least one of the debtor			nilar debts	ng plane, and other	
	At least one of the debtor Check if this claim is fo		☑ Ot	her. Specify		
		•				
	Is the claim subject to offset No	et?				
	☐ Yes					
4.3		-u-4				\$1,200.00
7.0	comenity bank/victoria se Nonpriority Creditor's Name	cret	Last 4	digits of account number _		
	po box 182789			was the debt incurred? _		
	Number Street			he date you file, the claim is: ontingent	: Check all that apply.	
	Columbus, OH 43218 City	State ZIP Code	_	nliquidated		
	•		Dis	•		
	Who incurred the debt? Ch	neck one.		f NONPRIORITY unsecured	I claim:	
	□ Debtor 1 only□ Debtor 2 only			udent loans		
	Debtor 1 and Debtor 2 or	nlv	☐ Ob	oligations arising out of a sepa	aration agreement or	
	At least one of the debtor	•	div	orce that you did not report a	as priority claims	
	☐ Check if this claim is fo			ebts to pension or profit-sharir nilar debts	ng plans, and other	

Official Form 106E/F

Is the claim subject to offset?

☑ Other. Specify

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Dante J Description Page 22 of 64 Case number (if known)

First Name Middle Name Last Name

r listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
Midland Funding LLC	Last 4 digits of account number	\$6,200.
Nonpriority Creditor's Name	When was the debt incurred?	
P.O Box 60578 Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Los Angeles, CA 90060 City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	☐ Obligations arising out of a separation agreement or	
At least one of the debtors and another	divorce that you did not report as priority claims	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other	
Is the claim subject to offset?	similar debts ☑ Other. Specify	
☑ No	— Outon Opcony	
☐ Yes		
North Shore Gas	Last 4 digits of account number	\$103.
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box A3991 Number Street	As of the date you file, the claim is: Check all that apply.	
Chicago, IL 60690	Contingent	
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
☐ At least one of the debtors and another	divorce that you did not report as priority claims	
☐ Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
Is the claim subject to offset?	☑ Other. Specify	
☑ No	_ 3.10.13 \$500.1)	
☐ Yes		
NorthShore Medical Group - Gurnee	Last 4 digits of account number	\$400.
Nonpriority Creditor's Name	When was the debt incurred?	
731 IL-21 Number Street	As of the date you file, the claim is: Check all that apply.	
Gurnee, IL 60031	☐ Contingent	
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	Disputed	
☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
At least one of the debtors and another	divorce that you did not report as priority claims	
☐ Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
Is the claim subject to offset?	☑ Other. Specify	
☑ No	Medical	
☐ Yes		

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	Cusc IO Z	3010 DOC 1	1 1100 00/11/10	Littered out III	10 10.20.07 DC3C Main	
tor 1	Dante	J	Doseument	Page 23 of 64	Case number (if known)	
	First Name	Middle Name	Last Name		,	

Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim \$400.00 4.7 U.S. Bank, N.A. Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 4801 Frederica Street As of the date you file, the claim is: Check all that apply. Number Contingent Owensboro, KY 42301 State ZIP Code ☐ Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ■ Student loans Debtor 1 and Debtor 2 only ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? **☑** Other. Specify

☑ No ☐ Yes

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Dante J Desetutantent Page 24 of 64 Case number (if known)

First Name Middle Name Last Name

art 3: List Others to Be Notified About a Debt That You Already Listed					
agency is trying to collect from you for a debt you owe to s	your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection omeone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, t you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons r submit this page.				
Blitt & Gaines	On which entry in Part 1 or Part 2 did you list the original creditor?				
Name 661 Glenn Ave	Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims				
001 Gleilli Ave					

Blitt & Gair	nes			On which entry in Part 1 or Part 2 did you list the original creditor?
Name	•			Line 4.4 of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims
661 Glenn A	Ave Street			
Number Street Wheeling, IL 60090				☑ Part 2: Creditors with Nonpriority Unsecured Claims
City	L 60090	State	ZIP Code	Last 4 digits of account number 3162
Blitt & Gair	nes			On which entry in Part 1 or Part 2 did you list the original creditor?
Name	_			Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims
661 Glenn A				
Number	Street			✓ Part 2: Creditors with Nonpriority Unsecured Claims
Wheeling, I	L 60090	State	ZIP Code	Last 4 digits of account number 3162
LJ Ross &	Associates			On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line AF at Obertann) D Bart A One Hanne with Britain Hannes at Obins
PO Box 183				Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
Ann Arbor, City	MI 48106	State	ZIP Code	Last 4 digits of account number 1806
Name				One which entry in Part 1 or Part 2 did you list the original creditor?
Ivanie				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			☐ Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
City		State	ZIP Code	
				One which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
				•
City		State	ZIP Code	
				One which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			☐ Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
City		State	ZIP Code	
				One which entry in Part 1 or Part 2 did you list the original creditor?
Name				, , , , , , , , , , , , , , , , , , , ,
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
City		State	ZIP Code	

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DanteJDescriptionPage 25 of 64First NameMiddle NameLast Name

Case number (if known) ___

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the a		ion is for sta	tistical reporting purposes only. 28 U.S.C. §159. Add the amounts f
type of uns	secured claim.		
			Total claim
otal claims	6a. Domestic support obligations	6a.	\$0.00
m Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00
			Total claim
al claims	6f. Student loans	6f.	\$0.00
Total claims rom Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$17,303.00
	6j. Total. Add lines 6f through 6i.	6j.	\$17,303.00

Fill in this information	to identify your case:				 Desc Main	
Debtor 1	Dante	J	Serrano			
Debtor 2	First Name	Middle Name	Last Name			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankru	uptcy Court for the:	N	orthern District of Illinoi	s		
Case number (if known)					Check if this is an amended filing	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or con	npany with whom you h	ave the contract or lease	State what the contract or lease is for
2.1	GM Financia	ıl		Auto Contract to be ASSUMED
	Name			
	401 Emnarca			<u></u>
	Number S	Street		
	Arlington, TX			<u></u>
	City	State	ZIP Code	
2.2				
	Name			
	Number S	Street		
	City	State	ZIP Code	
2.3				
	Name			
	Number S	Street		
	City	State	ZIP Code	
2.4				
	Name			
	Number S	Street		
	City	State	ZIP Code	
2.5				
	Name			
	Number S	Street		
	City	State	ZIP Code	

	_						_
Fil	I in this information to	o identify your case:			17/18	15:28:07	Desc Main
D	Debtor 1	Dante	J	Serrano			
		First Name	Middle Name	Last Name			
	Debtor 2						
(5	Spouse, if filing)	First Name	Middle Name	Last Name			
U	Inited States Bankru	ptcy Court for the:	N	orthern District of Illinois			
_	Case number f known)						Check if this is an amended filing
	fficial Form		odebtors				12/15
						71.1.164	
ootl	h are equally respo	nsible for supplying	g correct informatior		copy the Additional Pa	ge, fill it out, and	o married people are filing together, d number the entries in the boxes or n). Answer every question.
1.	Do you have any o ✓ No ☐ Yes	codebtors? (If you a	are filing a joint case, o	do not list either spouse as a	codebtor.)		
2.	•			operty state or territory? (Congton, and Wisconsin.)	ommunity property state	es <i>and territorie</i> s i	nclude Arizona, California, Idaho,
	☑ No. Go to line 3	i.					
		oouse, former spous	e, or legal equivalent	live with you at the time?			
	□No						
	Yes. In which	n community state of	r territory did you live?		Fill in the nam	e and current add	dress of that person.
	Name						
	Number	Street					
	City		State ZIP Code				
3.	codebtor only if th	nat person is a gua	rantor or cosigner. N		e creditor on Schedule	D (Official Forr	nerson shown in line 2 again as a n 106D), <i>Schedule E/F</i> (Official
	Column 1: Your co	debtor			Column 2: 1	The creditor to w	hom you owe the debt
						schedules that a	

Official Form 106H Schedule H: Your Codebtors page 1 of 1

Schedule D, line ___

☐ Schedule E/F, line ______

Schedule G, line _____

3.1

Name

Number

City

Street

State

ZIP Code

If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Drums, PA 18222 City State Zip Code How long employed there? Drums, PA 18222 City State Zip Code Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not pad monthly, calculate what the monthly wage would be. 2 S5,144,53 \$0.00	Fill	in this information to	identify your cas	e:			17/18 1	5:28:07	Desc Main	
First Name	Da	ahtor 1	Dante	1 9	errano	5 				
Spouse, if filling First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois A supplement showing postpetition chapter 13 income as of the following date MM / DD / YYYY	D	SDIOI 1								
Case number (if known) A supplement showing postpetition chapter 13 income as of the following date (if known) A supplement showing postpetition chapter 13 income as of the following date			First Name	Middle Name La	st Name			Check	if this is:	
Case number (If known) A supplement showing postpotetion chapter 13 income as of the following date MM / DD / YYYY	Ur	nited States Bankrup	otcy Court for the:	Northe	n District of Illinois			☐An	amended filing	
Describe From 1061 Schedule I: Your Income as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct formation. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your souse is not filing with you, then include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any diditional pages, write your name and case number (if known). Answer every question. 2011 I: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information bout additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's name Employer's name Employer's name Employer's name Employer's address Employer's address Drums, PA 18222 City State Zip Code City City	Ca	ase number _								
e as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct formation. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your obuse is not filling with you, on the include information about your spouse. If more spouse. If you are separated and your obuse is not filling with you, on the include information about your spouse. If more species hereded, attach a separate sheet to this form. On the top of any diditional pages, write your name and case number (if known). Answer every question. 2								MN	// DD / YYYY	
ea scomplete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct formation. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your souse is not filling with you, on to include information about your spouse. If more spouse in ording with you, on the top of any diditional pages, write your name and case number (if known). Answer every question. 2art 1: Describe Employment 1. Fill in your employment Information. Poebtor 2 or non-filling spouse Debtor 1)f	ficial Form	106I							
formation. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If not include information about your spouse in your spouse. If not include information about your spouse in your spouse. If not include information about your spouse include including include including include student information. Debtor 1				come						12/15
If you have more than one job, attach a separate page with information about additional employers. Occupation Employer's name Employer's address Cocupation Employer's address Drums, PA 18222 City State Zip Code How long employed there? 9 months Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. Entry or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions,) If not paid monthly, calculate what the monthly wage would be. 2. \$5,144.53 \$0.00	ddi	rt 1: Describe	your name and ca				a, attacin a sep			
attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address Employer's address Drums, PA 18222 City State Zip Code City State Zip Code How long employed there? 9 months Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you non-filing spouse unless you are separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 2. \$5,144.53 \$0.00		information.						Deb	tor 2 or non-filing spous	е
Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address Employer's address Drums, PA 18222 City State Zip Code City State Zip Code How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filling spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 2. \$5,144.53 \$0.00		attach a separate p information about a	age with		Sales Rep			□ Emplo	oyed Not Employed	
Occupation may include student or homemaker, if it applies. Drums, PA 18222				•		Α				
City State Zip Code How long employed there? 9 months Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 2. \$5,144.53 \$0.00				Employer's address				Number	Street	
City State Zip Code How long employed there? 9 months Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 2. \$5,144.53 \$0.00					Drums PA 18222			_		
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 2. \$5,144.53 \$0.00						State	Zip Code	City	State Z	p Code
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filling spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 2. \$5,144.53 \$0.00				How long employed there	9 months					
are separated. If you or your non-filling spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filling spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 2. \$5,144.53 \$0.00	Pa	rt 2: Give Deta	ails About Mor	nthly Income						
If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 2. \$5,144.53 \$0.00			income as of the	date you file this form. If yo	u have nothing to repo	rt for any line	e, write \$0 in the	space. Includ	de your non-filing spouse u	nless you
2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 2. \$5,144.53 \$0.00		If you or your non-fi		more than one employer, com	bine the information fo	all employe	rs for that perso	on the lines	below. If you need more s	pace,
deductions.) If not paid monthly, calculate what the monthly wage would be. 2. \$5,144.53 \$0.00						For	r Debtor 1			
3. Estimate and list monthly overtime pay. 3. +\$0.00 +\$0.00	2.						\$5,144.53		\$0.00	
	3.	Estimate and list n	nonthly overtime	рау.	3.	+	\$0.00	+	\$0.00	

\$5,144.53

\$0.00

4. Calculate gross income. Add line 2 + line 3.

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				For Debtor 1		For Debtor 2 or non-filing spouse		
	Copy line 4 here→	4.		\$5,144.53		\$0.00		
5.	List all payroll deductions:							
	5a. Tax, Medicare, and Social Security deductions	5a.		\$1,467.14		\$0.00		
	5b. Mandatory contributions for retirement plans	5b.		\$0.00		\$0.00		
	5c. Voluntary contributions for retirement plans	5c.		\$0.00		\$0.00		
	5d. Required repayments of retirement fund loans	5d.		\$0.00		\$0.00		
	5e. Insurance	5e.		\$43.33		\$0.00		
	5f. Domestic support obligations	5f.		\$0.00		\$0.00		
	5g. Union dues	5g.		\$242.67		\$0.00		
	5h. Other deductions. Specify:	5h.	+	\$0.00	+	\$0.00		
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.		\$1,753.14		\$0.00		
0. 7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$3,391.40		\$0.00		
		7.		φυ,υθ1.40		φυ.υυ_		
8.	List all other income regularly received:							
	8a. Net income from rental property and from operating a business, profession, or farm							
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.							
	ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends	8a.		\$0.00		\$0.00		
	8c. Family support payments that you, a non-filing spouse, or a dependent	8b.		\$0.00		\$0.00		
	regularly receive Include alimony, spousal support, child support, maintenance, divorce			40.00		40.00		
	settlement, and property settlement.	8c.		\$0.00		\$0.00		
	8d. Unemployment compensation	8d.		\$0.00		\$0.00		
	8e. Social Security	8e.		\$0.00		\$0.00		
	8f. Other government assistance that you regularly receive							
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.							
	Specify: Other Government Assistance Link	8f.		\$500.00		\$0.00		
	8g. Pension or retirement income	8g.		\$0.00		\$0.00		
	8h. Other monthly income. Specify:	8h.	+	\$0.00	+	\$0.00		
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.		\$500.00		\$0.00		
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse	10.		\$3,891.40] + [\$0.00	=	\$3,891.4
11.	State all other regular contributions to the expenses that you list in Schedule.	J.			J L		L	
	Include contributions from an unmarried partner, members of your household, your driends or relatives.	depend	ents, you	ur roommates, ar	nd oth	er		
	Do not include any amounts already included in lines 2-10 or amounts that are not a	vailable	to pay	expenses listed i	n <i>Sch</i>	edule J.		
	Specify:				_	11	٠	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The result amount on the Summary of Your Assets and Liabilities and Certain Statistical Information			•	me. W	rite that 12.		\$3,891.40
							C	ombined
							m	onthly income
13.	Do you expect an increase or decrease within the year after you file this form?							
	☑No. ☐Yes. Explain:							

	I in this information to	identify your cooc:			10	7/18 15:28:07	С	esc Main
ГШ	in this information to	dentity your case.						
D	Debtor 1	Dante	J	Serrano				
		First Name	Middle Name	Last Name		Check if this is:		
	Debtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		An amended filin	-	and the settle of the se
	Inited States Bankrup			lorthern District	of Illinois	☐ A supplement sh chapter 13 incon		g postpetition of the following date:
_	ase number					MM / DD / YYY	Υ	
(if	f known)							
Οſ	fficial Form	106J						
So	chedule J	 : Your Ex	penses					12/15
				le are filing toge	ther, both are equally respo	nsible for supplying	corre	ct information. If more space is
					write your name and case			
Pa	art 1: Describe	Your Household						
1.	Is this a joint case	?						
	✓ No. Go to line 2							
	Yes. Does Deb	tor 2 live in a separa	ate household?					
	□No							
	☐Yes. [Debtor 2 must file Of	ficial Form 106J-2, I	Expenses for Sep	parate Household of Debtor 2			
2.	Do you have depe	endents?	□No					
	Do not list Debtor 1	and	Yes. Fill out this	information for	Dependent's relationship	•	nt's	Does dependent live
	Debtor 2.	o and antal names	each dependen		Debtor 1 or Debtor 2	age	—	with you? ☐ No.
	Do not state the de	bendents names.			Child			
								No
								− □Yes □No
								_ ☐Yes
								□ No - □ Yes
								☐ Yes ☐ No
								¯ ☐Yes
3.	, ,	•	√ No					
	of people other the your dependents?		Yes					
Pa	art 2: Estimate	Your Ongoing N	Monthly Expense	es				
								eport expenses as of a date after
the	e bankruptcy is filed	I. If this is a supplen	nental <i>Schedule J</i> , o	check the box at	t the top of the form and fill	in the applicable date	e.	
	clude expenses paid ch assistance and I		-	-			Yo	our expenses
4.	The rental or home	e ownership expens	ses for your residen	ce. Include first m	nortgage payments and any i			
	ground or lot.				•	4.		\$1,011.00
	If not included in	ine 4:						
	4a. Real estate taxe	es				4a.		\$0.00
	4b. Property, home	owner's, or renter's i	nsurance			4b.	_	\$0.00

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

4c.

4d.

\$0.00

\$0.00

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Dogunaent Middle Name

		Your expenses
Additional mortgage payments for your residence, such as home equity loans	5	
5. Utilities:		
6a. Electricity, heat, natural gas	6a	\$300.00
6b. Water, sewer, garbage collection	6b	\$60.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$495.00
6d. Other. Specify:	6d.	\$0.00
7. Food and housekeeping supplies	7.	\$800.00
3. Childcare and children's education costs	8.	\$0.00
Clothing, laundry, and dry cleaning	9.	\$100.00
Personal care products and services	10.	\$50.00
Medical and dental expenses	11.	\$100.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12.	\$270.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
Charitable contributions and religious donations	14.	\$0.00
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 		
15a. Life insurance	15a	\$0.00
15b. Health insurance	15b.	\$125.00
15c. Vehicle insurance	15c	\$0.00
15d. Other insurance. Specify:	15d. -	\$0.00
 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 	16.	\$0.00
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a	\$580.00
17b. Car payments for Vehicle 2	17b	
17c. Other. Specify:	17c	
17d. Other. Specify:	17d	
 Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 	18.	\$0.00
9. Other payments you make to support others who do not live with you. Specify:	19.	\$0.00
Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a.	\$0.00
20b. Real estate taxes	20b.	\$0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

Debtor 1 Case 18-23316 Doc 1 Files 08/17/18 Entered 08/17/18 15:28:07 Desc Main

First Name Middle Name Document Page 32 of 64

21.	Other. Spec	cify:	21.	+\$0.00
22.	Calculate ye	our monthly expenses.		
	22a. Add lin	es 4 through 21.	22a.	\$3,891.00
	22b. Copy li	ne 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$0.00
	22c. Add line	e 22a and 22b. The result is your monthly expenses.	22c.	\$3,891.00
23.	Calculate y	our monthly net income.		
	23a. Copy lii	ne 12 (your combined monthly income) from Schedule I.	23a.	\$3,891.40
	23b. Copy ye	our monthly expenses from line 22c above.	23b.	\$3,891.00
	23c. Subtrac	ct your monthly expenses from your monthly income.		DO 10
	The re	esult is your monthly net income.	23c.	\$0.40
24.	For example	ect an increase or decrease in your expenses within the year after you file this form? e, do you expect to finish paying for your car loan within the year or do you expect your		
		ayment to increase or decrease because of a modification to the terms of your mortgage?		
	√ No. ☐Yes.	None		

Debtor 1 Dante J Serrano First Name Middle Name Last Name	
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: Northern District of Illinois	
Case number (if known) Check if amended	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$49,743.00 \$13,900.00 \$63,643.00
Tart 2. Summarize roar Elabinities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$106,250.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$17,303.00
Your total liabilities	\$123,553.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$3,891.40
5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$3,891.00

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Page 34 of 64 Dosewingent Case number (if known) -Dante First Name Middle Name Last Name

Answer These Questions for Administrative and Statistical Records 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. **√**1 Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income. Copy your total current monthly income from Official \$4,550.93 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority \$0.00 claims. (Copy line 6g.) 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) \$0.00 9g. Total. Add lines 9a through 9f. \$0.00

Fill in this information t	o identify your case:			1//18 15.28.0/	Desc Main
Debtor 1	Dante	J	Serrano		
	First Name	Middle Name	Last Name		
Debtor 2				_	
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankru	ptcy Court for the:	N	orthern District of Illinois	-	
Case number (if known)					Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

olid you pay or agree to pay someone who is NOT an atte	orney to help you fill out bankruptcy forms?
☑ No ☑ Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Inder penalty of perjury, I declare that I have read the su	ımmary and schedules filed with this declaraion and that they are true and correct.
Jnder penalty of perjury, I declare that I have read the su	ummary and schedules filed with this declaraion and that they are true and correct.
Under penalty of perjury, I declare that I have read the su	ummary and schedules filed with this declaraion and that they are true and correct.
X /s/ Dante J Serrano	
V	ummary and schedules filed with this declaraion and that they are true and correct.

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			17(7(3)111(3)11	1 7000 300 01 01
Fill in this information	to identify your case:			
Debtor 1	Dante	J	Serrano	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankru	ptcy Court for the:		Northern District of I	Ilinois
Case number (if known)				

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

What is your current marital sta	tus?				
■ Married					
✓ Not married					
During the last 3 years, have you	ı lived anywhere ot	her than where you live n	ow?		
☑ No					
Yes. List all of the places you li	ived in the last 3 yea	ars. Do not include where y	ou live now.		
Debtor 1:		Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there	
			☐ Same as Debtor 1		Same as Debtor 1
		_ From			_ From
Number Street		To	Number Street		To
City St	ate ZIP Code	-	City	State ZIP Code	_
			Same as Debtor 1		☐ Same as Debtor 1
		_ From			_ From
Number Street		To	Number Street		To
	ate ZIP Code	-	City	State ZIP Code	_

ebtor 1	Case 18-233	316 Doc 1	Filed 08/17/ Document Serrano			Desc Main
	First Name	Middle Name	Last Name		•	,
include Arizo Valida No Yes. M		iisiana, Nevada, Ne dule H: Your Codel	w Mexico, Puerto Ric	o, Texas, Washington, and \		ity property states and territories
Fill in the total	al amount of income you r	eceived from all job	s and all businesses,	s during this year or the two including part-time activities only once under Debtor 1.	o previous calendar years? s.	
☐ No						
√ Yes. Fi	ill in the details.					
		Debtor	1		Debtor 2	
		Source	s of income	Gross Income	Sources of income	Gross Income
		Check a	all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
	uary 1 of current year un iled for bankruptcy:	ui uic -	es, commissions, uses, tips	\$39,052.00	☐ Wages, commissions, bonuses, tips	
		Opera	ating a business		Operating a business	
	to December 31, 2017	-	es, commissions, uses, tips	\$58,082.00	☐ Wages, commissions, bonuses, tips	
(YY'	YY Dopera	ating a business		Operating a business	
	llendar year before that: to December 31, 2016		es, commissions, uses, tips	\$69,513.00	☐ Wages, commissions, bonuses, tips	
(barraary 1	YY'	YY Dopera	ating a business		Operating a business	
Include incompayments; per have income		that income is taxab terest; dividends; m	le. Examples of <i>other</i> oney collected from la	income are alimony; child s		ployment, and other public benefit u are filing a joint case and you
		Debtor	1		Debtor 2	
			s of income e below.	Gross income from each source	Sources of income Describe below.	Gross Income from each source
				(before deductions and exclusions)		(before deductions and exclusions)
	uary 1 of current year un iled for bankruptcy:	itil the				

	Case 18-2	3316 Doc	1 Filed 08/3		8/17/18 15:28:07	Desc Main
tor 1	Dante	J	Serrano			known)
	First Name	Middle Name	Last Name			
For last	calendar year:					<u> </u>
January	/ 1 to December 31, 20	17)				
		YYYY				
			-			
For the	calendar year before th	nat:				_
(January	1 to December 31, 20	<u>16</u>	_			
						_
rt 3: L	ist Certain Payme	ents You Made	Before You Filed	l for Bankruptcy		
Are eithe	er Debtor 1's or Debtor	2's debts primarily	consumer debts?			
☐No.				ts. Consumer debts are defin	ned in 11 U.S.C. § 101(8) as	"incurred by an
	individual primarily fo					
	During the 90 days be	efore you filed for ba	ankruptcy, did you pay	any creditor a total of \$6,425	* or more?	
	☐ No. Go to line 7.					
				\$6,425* or more in one or mo		
		o not include payme to an attorney for this		port obligations, such as chil	d support and alimony. Also	, do not include
		-		for cases filed on or after the	date of adjustment.	
	, ,				·	
Yes.	Debtor 1 or Debtor 2 o	or both have prima	rily consumer debts	5.		
	During the 90 days before	re you filed for bank	kruptcy, did you pay ar	ny creditor a total of \$600 or r	nore?	
	☐ No. Go to line 7.					
	✓ Yes. List below ea	uch creditor to whom	you paid a total of \$6	600 or more and the total amo	ount you paid that creditor. D	o not include
			obligations, such as c	hild support and alimony. Als	o, do not include payments t	o an attorney for
	this bankrupt	cy case.				
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for
			pay			□6 .
	Wells Fargo Home M	ortgage	Aug 01, 2018	\$3,033.00	\$89,000.00	Mortgage
	Creditor's Name				_	☐ Car ☐ Credit card
	Correspondence X250	<u>)1-01T</u>	Jul 01, 2018	-		☐ Credit card ☐ Loan repayment
	1 Home Campus Number Street		Jun 01, 2018	-		Suppliers or vendors
	Des Moines, IA 50328	•				Other
		State ZIP Code				
	GM Financial		Aug 01, 2018	\$1,740.00	\$12,000.00	☐ Mortgage
	Creditor's Name			Ţ.;o.oo	Ţ : _ ,000.30	√ Car
	401 Emnarcadero Number Street		Jul 01, 2018			Credit card
			Jun 01, 2018	_		Loan repayment
	Arlington, TX 76014 City	State ZIP Code	·	-		Suppliers or vendors
	- ·					Other

or 1	Dante	J	Serran	ment Page 3	39 of 64 Case r	number (if known)
	First Name	Middle Name				antico (ii iiiomi)
					d anyone who was an ins	ider? neral partner; corporations of which you are
er, direct	tor, person in contro	ol, or owner of 20%	or more of their voti	ng securities; and any ma	anaging agent, including o	one for a business you operate as a sole
_	1 U.S.C. § 101. Incl	ude payments for d	omestic support obli	gations, such as child sur	oport and alimony.	
No						
Yes. Lis	st all payments to a	n insider.				
			Dates of	Total amount paid	Amount you still owe	Reason for this payment
			payment			
sider's N	lame					
ımber	Street			-		
				-		
ty	Sta	te ZIP Code				
sider's N	lame			-		
				-		
ımber	Street			_		
ity	Sta	te ZIP Code				
		ed for bankruptcy c		ayments or transfer any	, nronarty on account of	a debt that benefited an insider?
ıde payn	nents on debts gua	ranteed or cosigned	by an insider.	•	property on account or	
_	nents on debts gua		by an insider.	,	property on account of	
1 No		ranteed or cosigned		,	property on account of	
Ŋo						
Ŋo		ranteed or cosigned		Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Ŋo		ranteed or cosigned	Dates of			Reason for this payment
No Yes. Lis	st all payments that	ranteed or cosigned	Dates of			Reason for this payment
No Yes. Lis	st all payments that	ranteed or cosigned	Dates of			Reason for this payment
∬No Yes. List sider's N	st all payments that	ranteed or cosigned	Dates of			Reason for this payment
1 No	st all payments that	ranteed or cosigned	Dates of			Reason for this payment
¶No ¶Yes. Lis	st all payments that	ranteed or cosigned	Dates of			Reason for this payment

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r 1	Dante First Name	J Middle Name	Serrano Last Nan	ne	_	number (if know	
			Dates of payment	Total amount paid	Amount you still owe	Reason for t	
nsider's Nam	ne						
Number S	Street						
City	State	ZIP Code					
	- Claire						
all such ma outes.				ny lawsuit, court action as, divorces, collection so			ly modifications, and cor
		Nat	ure of the case	Cou	rt or agency		Status of the case
Case title	Capital One Bank v Serrano	k USA NA Col	ections	<u>Lake</u> Court	County Clerk Name		☑ Pending ☐ On appeal
Case numbe	r 18 SC 3162			Numb			☐ Concluded
				City	kegan, IL 60085 Stat	e ZIP Code	
Case title	Midland Fund Lld	Col	ection		County Clerk		☑ Pending
	Serrano			Court	Name County St. #101		On appeal
Case numbe	r 18 Sc 4224			Numb			Concluded
					kegan, IL 60085	e ZIP Code	
				City	Stat	e ZIP Code	

First Name bliddle Name Creditor's Number Street Explain what happened Property was repossessed. Property was parabolished. Property was attached, selzed, or levied. Property was attached, selzed, or lev	tor 1 Dant	е	J	Document F Serrano		Case number (if known	7)
Property was repossessed. Property was gamished. Property was gamished. Property was gamished. Property was attached, seized, or levied.	First 1	Name	Middle Name			,	,
Sumber Street Explain what happened Property was repossessed. Property was foreclosed. Property was foreclosed. Property was garnished. Property was attached, selzed, or levied. Property was foreclosed. Property was foreclosed. Property was garnished. Property was attached, selzed, or levied. Property was a							
Explain what happened Property was repossessed. Property was foredosed. Property was foredosed. Property was garnished. Property was garnished. Property was garnished. Property was attached, selzed, or levied.	Proditor's Namo						_
Property was repossessed. Property was repossessed. Property was drankclosed. Property was repossessed. Property was repossessed. Property was repossessed. Property was prosedured. Property was property was prosedured. Property was drankclosed. Property was dran	Creditor's Name						
Property was repossessed. Property was foreclosed. Property was gamished. Property was gamished. Property was gamished. Property was gamished. Property was attached, seized, or levied. Property was repossessed. Property was foreclosed. Property was foreclosed. Property was smished. Property was smished. Property was attached, seized, or levied.	Number Street			Explain what happen	ed		
Property was granished. Property was garnished. Property was garnished. Property was garnished. Property was garnished. Property was attached, seized, or levied.	varibei Street			Property was repos	eassad		
Property was gamished. Property was attached, seized, or levied.							
Creditor's Name Creditor's Name							
Creditor's Name	0''	0	710.0				
Explain what happened Property was repossessed. Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied.	——————————————————————————————————————	State	ZIP Code	_ ,,,,			
Property was repossessed. Property was foreclosed. Property was foreclosed. Property was foreclosed. Property was gamished. Property was gamished. Property was attached, seized, or levied. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refundable a payment because you owed a debt? No Yes. Fill in the details. Describe the action the creditor took Date action was Amount taken	 Creditor's Name						
Property was repossessed. Property was foreclosed. Property was foreclosed. Property was foreclosed. Property was gamished. Property was gamished. Property was attached, seized, or levied. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refundable a payment because you owed a debt? No Yes. Fill in the details. Describe the action the creditor took Date action was Amount taken				Explain what happen	ned		
Property was foreclosed. Property was garnished. Property was garnished. Property was garnished. Property was attached, seized, or levied.	Number Street						
Property was garnished. Property was attached, seized, or levied. Property was attached, seized, or levied. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse which is a payment because you owed a debt? No							
City State ZIP Code Property was attached, seized, or levied. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refused a payment because you owed a debt? ✓ No ☐ Yes. Fill in the details. ☐ Describe the action the creditor took ☐ Date action was Amount taken ☐ Creditor's Name ☐ Last 4 digits of account number: XXXX———— ☐ City State ZIP Code ☐ Last 4 digits of account number: XXXX———— ☐ Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed believe, a custodian, or another official? ✓ No ☐ Yes ☐ Yes ☐ Vithin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ✓ No ☐ Yes ☐ Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ✓ No							
Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refusion was a payment because you owed a debt? Value							
make a payment because you owed a debt? No Yes. Fill in the details. Describe the action the creditor took Date action was taken	City	State	ZIP Code	Property was attach	ea, seizea, or ieviea.		
Creditor's Name Number Street Last 4 digits of account number: XXXX City State ZIP Code 2. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed ceiver, a custodian, or another official? No Yes 1. List Certain Gifts and Contributions 3. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?	√No	-	ed a debt?				
Number Street Last 4 digits of account number: XXXX−	√No	-		Describe the action the credit	tor took	Date action was	Amount
Last 4 digits of account number: XXXX List 4 digits of account number: XXXX Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed beiver, a custodian, or another official? No Yes It is Certain Gifts and Contributions Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?	√No	-		Describe the action the credi	tor took		Amount
Last 4 digits of account number: XXXX List 4 digits of account number: XXXX Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed beiver, a custodian, or another official? No Yes It is Certain Gifts and Contributions Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?	☑ No ☐ Yes. Fill in the de	-		Describe the action the credi	tor took		Amount
Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed between a custodian, or another official? ✓ No ✓ Yes **List Certain Gifts and Contributions** Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ✓ No	☑ No ☐ Yes. Fill in the de	-		Describe the action the credi	tor took		Amount
Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed between a custodian, or another official? ✓ No ✓ Yes **List Certain Gifts and Contributions** Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ✓ No	☑ No ☑ Yes. Fill in the do	-		Describe the action the credi	tor took		Amount
ceiver, a custodian, or another official? No Yes It 5: List Certain Gifts and Contributions Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?	☑ No ☑ Yes. Fill in the do	-					Amount
ceiver, a custodian, or another official? ☑ No ☐ Yes rt 5: List Certain Gifts and Contributions . Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☑ No	✓ No Yes. Fill in the de Creditor's Name Number Street	etails.					Amount
ceiver, a custodian, or another official? No Yes T 5: List Certain Gifts and Contributions Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?	✓ No ☐ Yes. Fill in the de Creditor's Name Number Street	etails.					Amount
Yes List Certain Gifts and Contributions Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No	✓ No Yes. Fill in the de Creditor's Name Number Street	etails.	ZIP Code	ast 4 digits of account number:	XXXX	taken	
List Certain Gifts and Contributions Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No	No Yes. Fill in the de Creditor's Name Number Street City . Within 1 year beforeiver, a custodian	State	ZIP Code	ast 4 digits of account number:	XXXX	taken	
a. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ✓ No	No Yes. Fill in the de Creditor's Name Number Street City . Within 1 year beforeiver, a custodian	State	ZIP Code	ast 4 digits of account number:	XXXX	taken	
a. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ✓ No	No Yes. Fill in the de Creditor's Name Number Street City Within 1 year before iver, a custodian	State	ZIP Code	ast 4 digits of account number:	XXXX	taken	
a. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ✓ No	No Yes. Fill in the de Creditor's Name Number Street City Within 1 year before iver, a custodian	State	ZIP Code	ast 4 digits of account number:	XXXX	taken	
√ No	No Yes. Fill in the de Creditor's Name Number Street City Within 1 year beforeiver, a custodian Yes	State Ore you filed for, or another of	ZIP Code r bankruptcy, was	ast 4 digits of account number:	XXXX	taken	
☑ No	✓ No Yes. Fill in the de Creditor's Name Number Street City . Within 1 year beforeiver, a custodian ✓ No Yes	State Ore you filed for, or another of	ZIP Code r bankruptcy, was	ast 4 digits of account number:	XXXX	taken	
	No Yes. Fill in the de Creditor's Name Number Street City . Within 1 year before ceiver, a custodian No Yes Tt 5: List Certa	State Ore you filed for, or another of	L ZIP Code r bankruptcy, was ficial?	ast 4 digits of account number: any of your property in the p	XXXX	ee for the benefit of cred	
Yes. Fill in the details for each gift.	✓ No ☐ Yes. Fill in the de Creditor's Name Number Street City ∴ Within 1 year before ceiver, a custodian ✓ No ☐ Yes Tt 5: List Certa ∴ Within 2 years before ceiver.	State Ore you filed for, or another of	L ZIP Code r bankruptcy, was ficial?	ast 4 digits of account number: any of your property in the p	XXXX	ee for the benefit of cred	
	✓ No ☐ Yes. Fill in the de Creditor's Name Number Street City 2. Within 1 year beforeiver, a custodian ✓ No ☐ Yes Int 5: List Certa 3. Within 2 years before	State Ore you filed for, or another of	L ZIP Code r bankruptcy, was ficial?	ast 4 digits of account number: any of your property in the p	XXXX	ee for the benefit of cred	
	✓ No ☐ Yes. Fill in the de Creditor's Name Number Street City 2. Within 1 year before ceiver, a custodian ✓ No ☐ Yes Int 5: List Certa 3. Within 2 years before in the december of th	State State ore you filed for another of the fore you filed for you filed for the fore you filed for you filed for you filed fore you filed for you fil	ZIP Code r bankruptcy, was ficial?	ast 4 digits of account number: any of your property in the p	XXXX	ee for the benefit of cred	

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Debtor 1 Serrano Case number (if known) _ Middle Name First Name Last Name Gifts with a total value of more than \$600 per Describe the gifts Value Dates you gave person the gifts Person to Whom You Gave the Gift Number City State ZIP Code Person's relationship to you ___ Gifts with a total value of more than \$600 per Describe the gifts Dates you gave Value the gifts Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you _____ 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? **√**No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that Describe what you contributed Value Date you contributed total more than \$600 Charity's Name Number Street City State ZIP Code

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Document

First Nan	J		Document Serrano	Page 43 of 64	Case number (if kno	own)
		ldle Name	Last Name			
6: List Certain	Losses					
Halifor Assessments of some			Clad Carl bardon	-4 did l did		b U b U
	you filed for ban	ikruptcy or sinc	e you filed for bankrup	otcy, did you lose anythi	ng because of theft, fire, of	ther disaster, or gambling
No						
Yes. Fill in the detail	ils.					
Describe the propert	v vou lost and	Describe any	insurance coverage for	or the loss	Date of your loss	Value of property lost
now the loss occurre			nount that insurance has			
			ms on line 33 of Sched			
7: List Certain	Dayments or	r Transfors				
7. List Certain	rayments of	i italisieis				
Vithin 1 year before king bankruptcy or p				g on your behalf pay or t	ransfer any property to any	one you consulted about
				s for services required in	your bankruptcy.	
]No			3 3	•	, ,	
Yes. Fill in the detai	ils.					
		Description	and value of any pro	perty transferred	Date payment or	Amount of payment
obert J. Adams & As	sociates				transfer was made	
erson Who Was Paid		Attorney's Fe	ee			
40 W. 35th Street					Aug 17, 2018	\$500.00
ımber Street						
Chicago, IL 60616 tv	State ZIP Code	_				
naadams.rja@gmail.						
mail or website addres						
erson Who Made the F	ayment, if Not Yo	u				
		Description	and value of any pro	perty transferred	Date payment or	Amount of payment
					transfer was made	
erson Who Was Paid						
umber Street						
ty 5	State ZIP Code					
ly .	state ZIF Code					
nail or website addres		_				
01 11000110 add161						
	Dayment if Not Vo	u				
erson Who Made the F	CANTILCTIF IN TACH AUT					
rson Who Made the F	ayını c ını, ii inot 10					

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tor 1	Case 18-	-23316 J	Doc 1	Filed 08/17/18 Document Serrano	Entered 08/17/ Page 44 of 64	718 15:28:07 D Case number (if know.	
.01 1	First Name		e Name	Last Name		Odde Hambel (II know.	,,
al with you not include	rear before you file r creditors or to me any payment or tr in the details.	nake paymei	nts to your cr	editors?	on your behalf pay or trans	sfer any property to anyo	ne who promised to help y
			Description	n and value of any prope	erty transferred	Date payment or transfer was made	Amount of payment
erson Who) Was Paid						
umber	Street		-				
			-				
Sity	State	ZIP Code					
1 No ☑Yes. Fill	in the details.		Descriptio transferred	n and value of property	Describe any pro	perty or payments receive	d Date transfer was made
erson Who	Received Transfe	r	-				
umber	Street		-				
ity	State	ZIP Code					
	Received Transfe	r	-				
umber	Street		-				
ity	State	ZIP Code					
-							
-	lationship to you _						
-	lationship to you _						

	Case 18 Dante	-23316 J	Doc 1	Filed 08/17/18 Document Serrano	Entered 08/17/1 Page 45 of 64	8 15:28:07 Des Case number (if known)	
	First Name	Middle	e Name	Last Name			
lled <i>ass</i>	ears before you et-protection de the details.		ıkruptcy, did	you transfer any property	to a self-settled trust or sin	nilar device of which you a	re a beneficiary?(These
			Description	n and value of the prope	rty transferred		Date transfer was
or trust			-	Traine value of the proper	ny dansierieu		made
List	Certain Fina	ncial Acco	ounts, Inst	ruments, Safe Depo	sit Boxes, and Storag	e Units	
tives, as	the details.				deposit; shares in banks, cre	an annone, bionerage nouse:	o, perioloti iurius,
s. FIII IN	the details.						
			Last 4 dig	its of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
of Finan	cial Institution		- XXXX- ₋		☐ Checking ☐ Savings		
er St	reet		_		☐ Money market ☐ Brokerage ☐ Other		
	State	ZIP Code	_				
of Finan	cial Institution		- XXXX- ₋		Checking		
er St	reet		-		☐ Savings ☐ Money market ☐ Brokerage		
			_		Other		
	State	ZIP Code	_				
er St				_ _ _		☐ Money market ☐ Brokerage	☐ Money market ☐ Brokerage

otor 1	Dante	3-23316 J	Doc 1		08/17/18 Iment		ered 08/17/18 46 of 64	Case number (if		Main
	First Name		e Name	Last Na				Caoc Hallibol (II	owii)	
			Who els	e had acces	s to it?		Describe the co	ntents		Do you still have it?
Name of Fin	ancial Institution		Name							□ No □ Yes
Nl.				2000						_
Number	Street		Number _	Street						
			City	5	State ZIP Co	ode				
City	State	ZIP Code								
√No	in the details.	in a storage u	ınit or place	other than y	our home wi	ithin 1 yea	r before you filed fo	or bankruptcy?		
			Who els	e has or had	access to it	?	Describe the co	ntents		Do you still have it?
			- 							□No
Name of Sto	orage Facility		Name							Yes
Number	Street		Number	Street						
					State ZIP Co	ode				
			City	`						
City	State	ZIP Code	- City	•						
art 9: Ide 3. Do you ho ✓ No	entify Propert	y You Hold	or Contro	ol for Some		property yo	ou borrowed from,	are storing for, o	r hold in tru	ust for someone.
nrt 9: Ide 3. Do you ho	entify Propert	y You Hold	or Contro	ol for Some	nclude any p	property yo	ou borrowed from, Describe the pro		r hold in tr	ust for someone.
art 9: Ide 3. Do you ho ✓ No	entify Property old or control any in the details.	y You Hold	or Contro	ol for Some	nclude any p	property yo			r hold in tru	
Ide Joyou ho Yes. Fill Owner's Nat	entify Property old or control any in the details.	y You Hold	or Contro	ol for Some else owns? In s the propert Street	nclude any p				r hold in tre	
art 9: Ide	entify Property old or control any in the details.	y You Hold	or Contro	ol for Some else owns? In s the propert Street	nclude any p				r hold in tro	

Case 18-23316 Doc 1 Filed 08/17/18 Entered 08/17/18 15:28:07 Desc Main Page 47 of 64 Document Debtor 1 Serrano Case number (if known) _ First Name Middle Name Last Name Part 10 Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? **√**No Yes. Fill in the details. Governmental unit Date of notice Environmental law, if you know it Name of site Governmental unit Street Number Number Street City State **ZIP Code** City State **ZIP Code** 25. Have you notified any governmental unit of any release of hazardous material? **√**No Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State **ZIP Code** ZIP Code City State 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

Yes. Fill in the details.

√No

btor 1	Case 18-2	23316	Doc 1	Filed 08/17/18 Document Serrano	Entered 08/1 Page 48 of 64		sc Main
DIOI	First Name	Middle	e Name	Last Name		Case number (II known) _	
			Court or a	agency	Nature of the cas	se	Status of the case
Case title							☐Pending
			Court Name	•	-		☐On appeal ☐Concluded
			Number	Street	-		Concluded
Case numb	er		- City	State ZIP Code			
			Oily	otate Zii Gode			
art 11: G	ive Details Aho	ut Vour B	Rusiness o	or Connections to An	v Rusiness		
all III. G	iive Details Abo	ut foul E	ousiness o	or Connections to An	y business		
27. Within 4 v	vears before vou file	ed for bank	ruptcv. did v	ou own a business or ha	ve any of the following	connections to any business?	
				rofession, or other activity,		- -	
			•	•	·	iiiie	
∟ Ar	member of a limited	liability com	ipany (LLC) (or limited liability partnersh	ip (LLP)		
□ A p	partner in a partners	hip					
☐ An	officer, director, or r	managing e	xecutive of a	corporation			
☐ An	n owner of at least 5%	% of the voti	ng or equity	securities of a corporation			
	ne of the above appli		-	•			
Yes. Ch	neck all that apply ab	ove and fill i	n the details	below for each business.			
Name			Describe	e the nature of the busine		Employer Identification number Do not include Social Security r	
						EIN:	
Number	Street		-				
Number	Street		Name of	accountant or bookkeep	per !	Dates business existed	
			-			FromTo	
			-				
City	State 2	ZIP Code				- , ,, ,,, ,,	
			Describe	e the nature of the busine		Employer Identification number Do not include Social Security r	
Name						,	
						EIN:	
Number	Street		-				
			Name of	faccountant or bookkeep	er I	Dates business existed	
			-			From To	
			_			110	
City	State 2	ZIP Code					

Case 18-23316 Doc 1 Filed 08/17/18 Entered 08/17/18 15:28:07 Desc Main Page 49 of 64 Document Debtor 1 Dante Serrano Case number (if known). Middle Name First Name Last Name Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. Name Number Street Dates business existed Name of accountant or bookkeeper From _ _ To _ ZIP Code City State 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. **√**No Yes. Fill in the details below. Date issued Name MM / DD / YYYY Number

City

ZIP Code

State

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Debtor 1	Dante	J	Serrano	Case number (if known)
	First Name	Middle Name	Last Name	
Part 12: S	ign Below			
				d I declare under penalty of perjury that the answers are true and
			ealing property, or obtaining n to 20 years, or both. 18 U.S.C.	noney or property by fraud in connection with a bankruptcy case
canresultin	mies up to \$250,000,	or imprisoriment for up	10 20 years, or bour. 10 0.0.0.	33 102, 1041, 1010, and 3011.
X	/s/ Dante	J Serrano	X	
Signat	ture of Dante J Serran		Signature of	
Signat	die of Danie 3 Senan	J, Debior 1	Signature or	
Date	08/17/2018		Date	
_		-		
Did you attac	ch additional pages to	your Statement of Fina	ancial Affairs for Individuals F	Filing for Bankruptcy (Official Form 107)?
√ No				
Yes				
163				
Did you pay	or agree to pay some	one who is not an attorr	ney to help you fill out bankrup	otcy forms?
√ No	0 , ,		, , , , , , , , , , , , , , , , , , , ,	•
IVO				Attach the Bankruptcy Petition Preparer's Notice,
Yes. Na	me of person			Declaration, and Signature (Official Form 119).

Fill in this information t	to identify your case:			 0.20.07	Desc Main
Debtor 1	Dante	J	Serrano		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankru	ptcy Court for the:	N	orthern District of Illinois		
Case number (if known)					Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Identify the cred	ditor and the property that is collateral	What do you intend to do with the property that secures a	
One alities who		debt?	exempt on Schedule C?
Creditor's name:	Wells Fargo Acceptance	☐ Surrender the property.	☑ No
	· ·	Retain the property and redeem it.	☐ Yes
Description of Bed and couches property	Retain the property and enter into a Reaffirmation Agreement.		
securing debt:		Retain the property and [explain]:	
Creditor's		☐ Surrender the property.	☑ No
name:	GM Financial	Retain the property and redeem it.	Yes
Description of property securing debt:		Retain the property and enter into a Reaffirmation Agreement.	
		Retain the property and [explain]:	

Debtor 1

Gase 18-23	3316 Doc 1	Fileg 08/17/18	Entered 08/17/18 15:28:07 Fir kn Desc Main
First Name	Middle Name	Dogymant	Page 52 of 64

Additional Page for Part 1							
Creditor's name:	Wells Fargo Home Mortgage	Surrender the property.Retain the property and redeem it.	☐ No ☑ Yes				
Description of property securing debt:	3301 Newcastle Rd Waukegan, IL 60087	 Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: 					
		Treating property and populary.					

Debtor 1

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Middle Name

Dogument

escribe your unexpi	ed personal property leases	Will the lease be assumed?
essor's name:	GM Financial	☐ No
escription of leased operty:	Auto	√ Yes
essor's name:		□ No
SSOI STIAITIE.		☐ Yes
escription of leased operty:		Tes Tes
ssor's name:		□ No
escription of leased operty:		☐ Yes
essor's name:		□ No
escription of leased operty:		Yes
ssor's name:		□ No
escription of leased operty:		☐ Yes
ssor's name:		□ No
escription of leased operty:		Yes
ssor's name:		□ No
escription of leased operty:		Yes
3: Sign Below	v I dealare that I have indicated my intention about any proport	y of my estate that secures a debt and any personal property that

Date 08/17/2018

MM/ DD/ YYYY

MM/ DD/ YYYY

Date.

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United States Bankruptcy Court Northern District of Illinois

In re	Serrano, Dante J	Case No	
	Debtor(s)	Chapter <u>7</u>	
	DISCLOSURE	OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)
1.	named debtor(s) and that co bankruptcy, or agreed to be p	(a) and Fed. Bankr. P. 2016(b), I certify that I am the ampensation paid to me within one year before the file paid to me, for services rendered or to be rendered or in connection with the bankruptcy case is as follow	ling of the petition in net behalf of the
	FLAT FEE		
	For legal services, I have	agreed to accept	\$1,100.00
	Prior to the filing of this s	statement I have received	
	Balance Due		<u>\$500.00</u>
	RETAINER		\$600.00
	For legal services, I have	e agreed to accept and received a retainer of	
	The undersigned shall bi	ill against the retainer at an hourly rate of	
		e schedule.] Debtor(s) have agreed to pay all Court nses exceeding the amount of the retainer.	
2	\$335.00 of the filing fee has	s been paid.	
3. 7	The source of the compensation	on to be paid to me was:	
	☑ Debtor	Other (specify)	
4. 7	The source of compensation to	be paid to me is:	
	☑ Debtor	Other (specify)	
	✓ I have not agreed to share unless they are members and a	the above-disclosed compensation with any other pe associates of my law firm.	rson
p	persons who are not members	above-disclosed compensation with a other person o or associates of my law firm. A copy of the agreements of the people sharing in the compensation, is attacks	nt,
6. I	n return for the above-disclose	ed fee, I have agreed to render legal service for all as	pects

a. Analysis of the debtor's financial situation, and rendering advice to the debtor

in determining whether to file a petition in bankruptcy;

of the bankruptcy case, including:

	Case 18-23316	Doc 1	Filed 08/17/18	Entered 08/17/18	3 15:28:07	Desc Main
In re	Serrano, Dante J		Document	Page 55 of 64	Case	No

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- 7. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

08/17/2018/s/ Tina AdamsDateSignature of Attorney

Robert J. Adams & Associates

Name of law firm

Case 18-23316 Doc 1 INFINE OF INFINE

IN RE: Serrano, Dante J CASE NO
CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.							
Date	08/17/2018	Signature	/s/ Dante J Serrano Dante J Serrano, Debtor				

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Blitt & Gaines 661 Glenn Ave Wheeling, IL 60090

Capital One 15000 Capital One Richmond, VA 23238

Capital One Bank (USA) NA Attn: General Correspondence PO Box 30285 Salt Lake City, UT 84130

comenity bank/victoria secret po box 182789 Columbus, OH 43218

GM Financial 401 Emnarcadero Arlington, TX 76014

LJ Ross & Associates PO Box 1838 Ann Arbor, MI 48106

Midland Funding LLC P.O Box 60578 Los Angeles, CA 90060

North Shore Gas PO Box A3991 Chicago, IL 60690

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NorthShore Medical Group -Gurnee 731 IL-21 Gurnee, IL 60031

U.S. Bank, N.A. 4801 Frederica Street Owensboro, KY 42301

Wells Fargo Acceptance Attn: Bankruptcy Dept. PO Box 13460 Philadelphia, PA 19101

Wells Fargo Home Mortgage Correspondence X2501-01T 1 Home Campus Des Moines, IA 50328 8/16/2018

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Debtor 1 Dante Serrano Case number (if known) First Name Middle Name Last Name Part 6: Answer These Questions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do you "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under Chapter No. I am not filing under Chapter 7. Go to line 18. Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Do you estimate that after administrative expenses are paid that funds will be available to distribute to unsecured creditors? any exempt property is M No excluded and administrative expenses are paid that funds Yes will be available for distribution to unsecured creditors? **☑** 1-49 **□** 50-99 **□** 100-199 1,000-5,000 5,001-10,000 25,001-50,000 18. How many creditors do you 200-999 10,001-25,000 50,000-100,000 estimate that you owe? More than 100,000 \$1,000,001-\$10 million \$0-\$50,000 \$500,000,001-\$1 billion 19. How much do you estimate \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion your assets to be worth? \$10,000,000,001-\$50 billion \$100,001-\$500,000 \$50,000,001-\$100 million \$100,000,001-\$500 million More than \$50 billion \$500,001-\$1 million \$0-\$50.000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you estimate \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

Dante J Serrano, Debtor 1 Executed on 08/16/2018

MM/ DD/

YYYY

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Fill in this information	on to identify your case	:		3.001	
Debtor 1	Dante	J	Serrano		
REC 40003-890-96795	First Name	Middle Name	Last Name		
Debtor 2		100			
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	No	orthern District of Illinois		
Case number (if known)	(managed and a second				Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an atto	orney to help you fill out bankruptcy forms?
✓ No ☐ Yes, Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	Laborator of the decists this declaration and that they are true and correct
Under penalty of perjury, I declare that I have read the su	immary and schedules filed with this declaraion and that they are true and correct.
Dante J Serrano, Debtor 1, Debtor 1	X

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

8/16/2018

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Desc Main

Debtor 1

Dante

Middle Name

Dosument

Page 61 of 64 Case number (if known)

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

nature of Dante J Serrano, Debtor

Date 08/16/2018

Signature of

Date_

Did you attach additional pages to your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

√ No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

√No

Yes. Name of person _

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 14

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Part 2: List Your Unexpired Personal Property Leases

First Name

Describe your unexpi	red personal property leases	Will the lease be assumed?
essor's name:	GM Financial	□ No
cosor s name.	GWT Handida	☑ Yes
escription of leased roperty:	Auto	G 165
essor's name:		□No
Description of leased roperty:		Yes
essor's name:		□No
Description of leased roperty:		Yes
essor's name:		□ No
Description of leased roperty:		Yes
essor's name:		□ No
Description of leased property:		☐ Yes
essor's name:		□No
Description of leased property:		Yes
essor's name;		□ No
Description of leased property:		Yes
t 3: Sign Below		
	r, I declare that I have indicated my intention about any proper to an unexpired lease.	rty of my estate that secures a debt and any personal
De 1	Y	
ignature of Debtor 1	Signature of Debtor 2	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Deb	tor 1	Dante	J	Serrano		Case nu	ımber (if known)	
		First Name	Middle Name	Last Name		Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
8. L	Jnemploym	ent compensation				\$0.00		
[o not enter	the amount if you	contend that the amo	unt received was a ben	efit under		Land Control of the C	-
t	he Social Se	ecurity Act. Instead	list it here:		\downarrow			
	For you	J			\$0.00			
	For you	ır spouse						
		retirement income. ocial Security Act.	Do not include any a	mount received that wa	as a benefit	\$0.00		-
	Do not inclureceived as	ude any benefits red a victim of a war c	ceived under the Soc rime, a crime against	pecify the source and a lal Security Act or payn humanity, or internatio on a separate page and	nents nal or			
								- n
	Total amou	nts from separate p	ages, if any.			+	+	-
11.	Calculate y column. Th	our total current men add the total for	onthly income. Add Column A to the tota	lines 2 through 10 for e I for Column B.	ach	\$4,550.93		Total current monthly income
12. (Calculate yo	our current monthly		Applies to You r. Follow these steps: ne 11			Copy line 11 here →	\$4,550.93
			er of months in a yea				0.0p,	x 12
		5 (5) 1	income for this part of	2			12b.	\$54,611.16
13. (Calculate th	e median family in	come that applies to	you. Follow these step	os:			
- 1	Fill in the sta	ate in which you live	ı.	Illinois				
	Fill in the nu	mber of people in y	our household.	6				
i	To find a list instructions	of applicable media	an income amounts,	ze of household go online using the link ble at the bankruptcy c	specified in the s		13.	\$113,285.00
	14a. 11 Line		equal to line 13. On	the top of page 1, chec	k box 1, There is	no presumption of al	buse.	
	14b. 🗖 Line Go	e 12b is more than I to Part 3 and fill out	ine 13. On the top of Form 122A-2.	page 1, check box 2, 7	he presumption o	of abuse is determine	d by Form 122A-2.	
pai	rt 3: Sign	Below						
	By signing	g here, i declare un	der penalty of perjury	that the information or	this statement a	nd in any attachment	s is true and correct.	
	x to				X			
	Signa	ture of Debtor 1			Sign	ature of Debtor 2		
	Date _	08/16/2018 MM/DD/YYYY			Date .	MM/DD/YYYY		
	If you che	cked line 14a, do N	OT fill out or file Forr	n 122A–2.				
	If you che	cked line 14b, fill or	ut Form 122A–2 and	file it with this form.				

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 2

8/16/2018

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IN THE UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS CHICAGO DIVISION (EASTERN)

IN RE: Serrano, Dante J

CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby ve	erifies that the attached list of creditors is true a	and correct to the best of his/her knowledge.

Date ____08/16/2018

Signature